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Bib Data Sheet

CONFIRMATION NO. 1537

|  |   |   |   |                                       |                                |
|--|---|---|---|---------------------------------------|--------------------------------|
| <b>SERIAL NUMBER</b><br>09/805,376   | <b>FILING DATE</b><br>03/14/2001<br><b>RULE</b>   | <b>CLASS</b><br>345                       | <b>GROUP ART UNIT</b><br>2173   | <b>ATTORNEY DOCKET NO.</b><br>36-1578 |                                |
| <b>APPLICANTS</b><br>Jake Hill, Ipswich, UNITED KINGDOM;<br>Peter J. Onion, Colchester, UNITED KINGDOM; <i>TH</i>  |   |   |   |                                       |                                |
| <b>** CONTINUING DATA *****</b><br><i>NONE TH</i>  |   |   |   |                                       |                                |
| <b>** FOREIGN APPLICATIONS *****</b><br>UNITED KINGDOM 00310225.8 11/17/2000 <i>TH</i>   |   |   |   |                                       |                                |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b><br><b>** 07/06/2001</b>   |   |   |   |                                       |                                |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after<br>met <i>Allowance</i><br>Verified and Acknowledged <i>TH</i><br>Examiner's Signature <i>TH</i> Initials |   | <b>STATE OR COUNTRY</b><br>UNITED KINGDOM | <b>SHEETS DRAWING</b><br>7  | <b>TOTAL CLAIMS</b><br>12             | <b>INDEPENDENT CLAIMS</b><br>4 |
| <b>ADDRESS</b><br>NIXON & VANDERHYE P.C.<br>1100 North Glebe Road, 8th Floor<br>Arlington, VA 22201  |   |   |   |                                       |                                |
| <b>TITLE</b><br>Interface device   |   |   |   |                                       |                                |
| <b>FILING FEE RECEIVED</b><br>920  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |   | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |                                       |                                |